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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2008		Application Number	10/534,257-Conf. #4508
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	May 10, 2005
		First Named Inventor	Shoji FURUSAKO
		Examiner Name	S. X. Wen
		Art Unit	1644
TOTAL AMOUNT OF PAYMENT (\$ 180.00)		Attorney Docket No.	1110-0326PUS1

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Nonc	<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number:	02-2448	Deposit Account Name:	Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) Indicated below, except for the filing fee				
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments				

FEE CALCULATION					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES					
FILING FEES SEARCH FEES EXAMINATION FEES					
Small Entity Small Entity Small Entity					
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)
Utility	310	155	510	255	210
Design	210	105	100	50	130
Plant	210	105	310	155	160
Reissue	310	155	510	255	620
Provisional	210	105	0	0	0
Fees Paid (\$)					
2. EXCESS CLAIM FEES					
Fee Description Small Entity					
Fee (\$)					
Each claim over 20 (including Reissues)					50
Each independent claim over 3 (including Reissues)					210
Multiple dependent claims					370
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
22	- 20 =	x _____	= _____	Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.					
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	
8	- 3 =	x _____	= _____	Fee Paid (\$)	
HP = highest number of independent claims paid for, if greater than 3.					
3. APPLICATION SIZE FEE					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).					
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	
_____	- 100 =	/50 =	(round up to a whole number) x _____	=	Fee Paid (\$)
4. OTHER FEE(S)					
Non-English Specification, \$130 fcc (no small entity discount)					
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00					
SUBMITTED BY					
Signature	[Signature]		Registration No. (Attorney/Agent)	40,069	Telephone (703) 205-8000
Name (Print/Type)	MaryAnne Armstrong, Ph.D.		Date	March 19, 2008	